



JAMES C. KIRKPATRICK
STATE INFORMATION CENTER
(573) 751-4936

JASON KANDER
SECRETARY OF STATE
STATE OF MISSOURI

DIVISION OF SECURITIES
(573) 751-4136

Complaint Information Sheet

Investor Information

☐ Mr.

☐ Mrs.

Your Name ☐ Ms. _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Home Telephone () _____ Business Telephone () _____

Email address _____ Other _____

Company and Representative Information

Name of Company _____ Representative _____

Address _____

City _____ State _____ Zip _____

Telephone () _____

Complaint Information

Please provide a brief summary of your complaint in the space provided below. If you feel that additional space is needed, feel free to use the space provided on the back of this form. Please answer the questions on the next page as well; this allows our staff to gather the most pertinent information to aid in our review of your complaint.

Investment Information

1. Explain what you were offered: _____

2. How much money did you invest? _____ Payment was made by: ___ cash ___ check ___ other
3. Date of investment(s): _____ Place of investment(s): _____
4. Please give a brief explanation of how you gained knowledge of this investment and exactly what you were told about the investment.

a. What were you told your money would be used for? _____

b. What amount of return were you promised? _____
c. What were you told about the risks of this investment? _____

d. Did you receive a prospectus or other information regarding the financial condition of the company? _____

e. Did the seller give you information that later turned out to be untrue? _____
If yes, please explain: _____

f. Did you sign a contract? _____
5. Have you contacted an attorney or any other government agency? _____
If yes, who? _____
6. Have you asked for the return of your initial investment? _____
If so, did you receive it? _____
7. Please provide the names, addresses, and telephone numbers of anybody else that you know that made the same investment or dealt with the same representative:

Document Copies

Please attach copies of the following documents:

Stock certificates/bonds/investment certificates

Confirmations of purchases

Cancelled checks (front and back)

Contracts

Any other documentation or advertising relating to the investment

Signature: _____

Printed name: _____ Date: _____

Please be advised that this division is prohibited by law from giving you legal advice, legal opinions, or acting as your private attorney. Therefore, you may wish to consult with a private attorney to discuss your legal rights and remedies.

If you have any question about this form, please call the investor hotline at: 1 (800) 721-7996.

Please mail all correspondence to:

Office of the Secretary of State

Securities Division

PO Box 1276, 600 W. Main St.

Jefferson City, MO 65102

To send your complaint via email: *securities@sos.mo.gov*

(If you file your complaint via the internet or via email, be sure and send the documents requested above.)